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TO:

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FROM:

Cynthia A. Harding, M.P.H. Cynthia A. Harding, M

Chief Deputy Director

SUBJECT:

NOTIFICATION OF INTENT TO ENTER INTO TWO SOLE SOURCE

CONTRACTS

This is to notify you that the Department of Public Health (DPH) intends to request delegated authority to execute two sole source contracts with AIDS Healthcare Foundation (AHF) and The Regents of the University of California, Los Angeles (Regents-UCLA) to provide oral health care services to HIV-positive residents of Los Angeles County.

In accordance with Board Policy 5,100, prior Board notice is required for any department requesting to enter into negotiations for a Board-approved sole source contract in excess of \$250,000.

Background

Access to oral health evaluation, prophylaxis, and care significantly improves oral health and quality of life for people living with HIV. The federal Health Resources and Services Administration (HRSA) guidelines and the County's Standards of Care for people living with HIV requires, at a minimum, an annual comprehensive oral examination. The County's Commission on HIV (COH) has prioritized increasing oral health care capacity for the County's HIV-positive population and supports the expansion of the County's oral health care investment.

Currently, there are more than 15,000 HIV-positive Ryan White Program (RWP)-eligible residents in Los Angeles County receiving ambulatory outpatient medical (AOM) services. However, the current Countyfunded oral health care system has the capacity to serve 6,398 unduplicated clients annually. In order to increase access to oral health care services, DPH developed an immediate, short-term strategy to expand oral health care services that included a two-phased approach.

Phase One involved a county-wide search for potential oral health care partners. DPH used the Department of Health Services' Public-Private Partnership (PPP) directory to identify existing oral health care providers within identified geographic areas of need that could begin providing oral health care services to the target population immediately and that had demonstrated successful experience working with the target population. On May 1, 2012, the Board granted the authority to DPH to increase funding and expand services under existing agreements with AIDS Project Los Angeles (APLA) and AltaMed Health Services Corporation (AltaMed), and entered into three new sole source contracts with City of Pasadena (COP),

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JWCH Institute, Inc. (JWCH), and Watts Healthcare Corporation (Watts). As a result, Phase One increased the number of providers in the County's current HIV/AIDS oral health care system to the following twelve providers: AltaMed; APLA; COP; East Valley Community Health Center (EVCHC); El Proyecto del Barrio, Inc. (EPDB); JWCH; Northeast Valley Health Corporation (NEVHC); University of Southern California (USC); St. Mary's Medical Center (SMM); Tarzana Treatment Centers, Inc. (TTC); Watts; and Long Beach Comprehensive Health Center (LBC). Phase One allowed for approximately 2,937 new clients to receive oral health care services, for a total of approximately 6,398 RWP clients served annually.

Justification to Enter into Sole Source Contracts

The purpose of Phase Two is to further enhance the County's oral health care portfolio and include a broader cross section of oral health care services available to residents throughout the county. Under Phase Two, the system will have the potential to serve an additional 3,400 unduplicated clients, bringing the system capacity to approximately 9,800 unduplicated clients annually, and therefore significantly closing the gap of underserved oral health clients in the County. In particular, Phase Two will significantly expand access to critical oral health specialty services such as endodontic services. To fully implement Phase Two, DPH recommends entering into sole source agreements with AHF and Regents-UCLA. DPH also recommends increasing funding for two existing providers: NEVHC and USC.

On August 2, 2012, DPH convened a meeting with the currently-funded oral health care providers to discuss oral health care expansion. As a result of the meeting, two providers (NEVHC and USC) indicated they had the capacity to immediately accommodate expansion if provided with additional resources. Since no other currently funded oral health care provider expressed capacity to expand at that time, DHSP reviewed the original list of potential providers from the PPP directory and RWP system of care from Phase One, and identified AHF and Regents-UCLA as providers who could expand capacity.

AHF is recommended for a sole source contract because they serve approximately 5,333 HIV-positive clients, most of whom qualify for RWP oral health care services. While the oral health services would be made available to all clients, the service delivery site is located in SPA 4, which continues to have the highest burden of HIV/AIDS in the county. The provision of oral health care services in SPA 4 by AHF will result in an additional 1,000 clients served, and help DPH with efforts to align medical care and ancillary services in single locations throughout the county in order to develop a "one-stop shopping" model for healthcare delivery.

Regents-UCLA is recommended for a sole source contract because they are able to provide a variety of much needed oral health care services, including specialty services such as endodontic, periodontal, and oral surgery services. With the exception of USC, no other DPH-contracted oral health care service provider can provide these much-needed specialty services, which currently have a waitlist of up to five months. Regents-UCLA is currently funded by HRSA under Part F of the RWP to provide dental services. The services to be funded through DPH will be offered through the UCLA School of Dentistry located in SPA 5, and will result in an additional 1,300 clients served throughout the county. SPA 5 is an area that is currently underserved in oral health care. Currently, no other DPH-funded oral health care provider is located in SPA 5.

Next Steps

It is the intent to conduct a solicitation for oral health care services. However, due to the recent time and resource intensive process to convert AOM services to a fee-for-service model, ongoing local efforts to successfully migrate clients from the RWP medical care system to Healthy Way LA, and the current limited capacity to conduct solicitations in DHSP, the development and release of a solicitation for oral

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health care services will be delayed. DHSP is currently developing a timeline for a solicitation process for oral health care services. In the meantime, Phase Two of the expansion of HIV/AIDS oral health care services will effectively meet the high client demand for services.

Notification Timeline

The Board letter to request the delegated authority to execute these sole source contracts is projected for the February 19, 2013, Board meeting. To allow time for your review and comments, we will not enter into negotiations until ten business days following the date of this memorandum.

If you have any questions or would like additional information, please let me know.

CAH:mmc

c: Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors